ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 43 | 2/26/01 |
| FORMALITY REVIEW | EP | 1027 | 04/04/01 |
| RESPONSE FORMALITY REVIEW | ijm | 657 | 7/19/01 |

## INDEX OF CLAIMS

| | | | | |
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| ✔ | Rejected | N | | Non-elected |
| = | Allowed | I | | Interference |
| – | (Through numeral)... Canceled | A | | Appeal |
| ÷ | Restricted | O | | Objected |

| Claim | | | Date |
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| Final | Original | | |
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If more than 150 claims or 10 actions
staple additional sheet here

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